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·								Application or Decket Number					
	Effective October 1, 2003 PATENT-APPLICATION-FEE-DETERMINATION-RECORD 09/015133												
CLAIMS AS FILED - PART ((Column 1) (Column 2)							SMALL ENTITY TYPE			OR	OTHER SMALL		
TOTAL CLAIMS			15					[F.]	FEL	1	RATE	FEL	
FOR			NUMBER	FILED	MUMU	NUMBER EXTRA		FEE	385 00	OR	BASIC FEE	/70.00	
TOTAL CHARGEABLE CLAIMS			13.5 mi	nus 20-:	•		X5.9				X\$18_		
INDEPENDENT CLAIMS			-	ings 3 -	•					OR			
м	JLTIPLE DEPE	NDENT CLAIM P					X43			OR	X86-		
ـــا							+145			OR	+290-		
* If the difference in column 1 is less than zero, enter '0' in column 2							TOV	ч.		OB	IOTAL.		
	CLAIMS AS AMENDED - PART II (Column 3) (Column 3)							LL Đ	NTITY	OH:	OTHER SMALL		
AMENDMENT A		ECMAINING ACTER AMENDMENT		DECAIS SINTH	RB Wati	i Pin a lai Philip	RAT	F	HONAL		HALL	HITONAL LIGNAL LIGHT	
	Total	. 10	Minus	. 0	10	-	XS 9	-		OR	X\$18		
	Independent	. 1	Minus	• • •	3		X43			OR	X86		
Ľ	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDENT	CLAIM			\dashv			000	•	
							+145			QR	+290= 101AL		
										OR	ADDIT FLE		
Г	<u> </u>	(Column 1) CLAIMS		(Colun		(Column 3)			ADDI			ADDI	
AMENOMENT B		REMAINING AFTEL ACE BOMERS		NUM 1989-76 1940-1	10.1	PRESENT E-TRA	RC!		TIONAL LUL		1851)	TIONAL EEE	
	Totai	. 10	i ducies	· 0	20		1.50	+	and the second	OН	ેપદાલ-્		
	Ingependent	· 1	Minus	•••	3		X43			OR	×86-		
_	FIRST PRESENTATION OF MULTIPLE DEPCHDENT CLAM]			On.		·	
							4 3/11/		Manage Landson	OH	+500 -		
							ነ ነነው ብላ ነ ነ		······································	OR	TOTAL ADDIT LEE	L	
(Cotumn 1) (Cotumn 2) (Cotumn 3) CLAMS (MSH65)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUME PREVIO	BER DUSLY	PRESENT EXTRA	RATI	Ξ	ADDI- TIONAL FEE		RATE	ADDI TIONAL FEE	
203	Total ·	.10	Minus	· 8	0	-0	×5.0			OR	X\$18₌		
ME	Independent	. /	Minus		3	-0	X/3.	7			X86=	<u> </u>	
٨	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM]			OR	700-		
+145=									,	OR	+290=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20" **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT, FEE		
		mber Previously Pa iber Previously Pai							ropriate bo	כוח בנו			